



Approved for use through 10/31/2002. OMB 0651-0031
U.S. Patent and Trademark Office: US DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

Substitute for form 1449A/PTO INFORMATION DISCLOSURE STATEMENT BY APPLICANT (use as many sheets as necessary)				Complete if Known	
				Application Number	
				Filing Date	
				First Named Inventor Jerome Knoplioch	
				Group Art Unit	
Examiner Name					
Sheet	1	of	1	Attorney Docket Number 16CT02141	

U.S. PATENT DOCUMENTS						
Examiner Initials*	Cite No. ¹	U.S. Patent Document		Name of Patentee or Applicant Of Cited Document	Date of Publication of Cited Document MM-DD-YYYY	Pages, Columns, Lines, Where Relevant Passages or Relevant Figures Appear
		Number	Kind Code ² (if known)			
	AA	6,643,533	B2	Knoplioch et al.	Nov. 4, 2003	
	AB	6,445,762	B1	Knoplioch et al.	Sep. 3, 2002	
	AC	6,421,413	B1	Knoplioch et al.	Jul. 16, 2002	
	AD	5,412,763		Knoplioch et al.	May 2, 1995	
	AE					
	AF					
	AG					
	AH					
	AI					
	AJ					
	AK					
	AL					
	AM					
	AN					
	AO					
	AP					
	AQ					
	AR					
	AS					
	AT					

FOREIGN PATENT DOCUMENTS								
Examiner Initials*	Cite No. ¹	Foreign Patent Document			Name of Patentee or Applicant of Cited Document	Date of Publication of Cited Document MM-DD-YYYY	Pages, Columns, Lines, Where Relevant Passages or Relevant Figures Appear	T 6
		Office ³	Number ⁴	Kind Code ⁵ (if known)				
	FA							
	FB							
	FC							

OTHER PRIOR ART - - NON PATENT LITERATURE DOCUMENTS			
Examiner Initials*	Cite No. ¹	Include name of the author (in CAPITAL LETTERS), title of the article (when appropriate), title of the Items (book, magazine, journal, serial, symposium, catalog, etc.), data, page(s), volume-issue number(s), publisher, city and/or country where published.	T ²

Examiner Signature	Date Considered:
-----------------------	---------------------

*EXAMINER: Initial if reference considered, whether or not citation is in conformance with MPEP 609. Draw line through citation if not in conformance and not considered. Include copy of this form with next communication to applicant.

¹Unique citation designation number. ²Applicant is to place a checkmark here if English language Translation is attached.

Burden Hour Statement: This form is estimated to take 2.0 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, D.C. 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.